



USSN: 09/673,798  
Dkt. No.: PP01521.101  
2302-1521

**PATENT**

**CERTIFICATE OF MAILING PURSUANT TO 37 CFR § 1.8**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 12, 2003.

11/12/2003

Michelle Hobson

Date

Signature

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In Re Application of:

PALIARD

Serial No.: 09/673,798

Filing Date: October 18, 2000

Title: ENHANCING IMMUNE RESPONSES TO  
GENETIC IMMUNIZATION BY USING  
CHEMOKINE

Examiner: Q. Li

Group Art Unit: 1632

Confirmation No.: 3092

Customer No.: 20855

**REQUEST FOR CONTINUED EXAMINATION  
UNDER 37 C.F.R. §1.114**

**Mail Stop RCE**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Applicants submit this request for continued examination under 37 C.F.R. §1.114 for the above-identified application.

Please consider the following submission(s) required under 37 C.F.R. §1.114:

[X] The amendment pursuant to 37 C.F.R. §1.116 previously submitted on September 23, 2003 (copy attached – 7 pages).

Also enclosed is:

[X] Return receipt postcard

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The fee for the request for continued examination is calculated as follows:

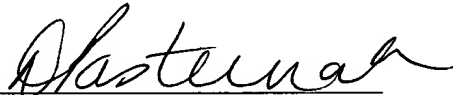
	NO. OF CLAIMS	CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	29	- 29	0	x \$18.00	0
Independent Claims	4	- 4	0	x \$86.00	0
Multiple dependent claims not previously presented, add \$290.00					0
Total Amendment Fee					0
Continued Examination Fee under 37 C.F.R. §1.17(e) of \$770.00 (\$385.00)					\$770.00
<b>TOTAL FEE DUE</b>					<b>\$770.00</b>

[X] A check for the total fee of \$770.00 is attached.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 18-1648.

Respectfully submitted,

Date: November 12, 2003

By:   
Dahna S. Pasternak  
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